Trust Account Drawdowns Report

Topic: FM07- Trust Accounts

Report ID: FM0706b

Report Content: This report displays the drawdowns made on the General Trust Account for each child, after the reimbursements are claimed by the state. The report also displays reversals and check cancellations of withdrawals that are specified by the user.

Dependencies: FM04a00 - Trust Account Drawdown Batch.

Frequency: Monthly – 10th business day of every month.

Runtime Parameters: User-specified <u>From Date</u> and <u>To Date.</u>

Other Parameters: By one county or by ALL counties.

Selection Criteria: Select trust_account_ledger records where
1. Transaction date - TRUST_ACCOUNT_LEDGER.dt_trans between from-date-parm and to-date-parm.
2. Created by the Trust Account Draw Down batch - TRUST_ACCOUNT_LEDGER.id_cr='7350' <u>OR</u> - For reversals of batch reimbursement withdrawals or cancelled payments where TRUST_ACCOUNT_LEDGER.id_pmnt <> Null AND TRUST_ACCOUNT_LEDGER.cd_detl = 14 OR TRUST_ACCOUNT_LEDGER.cd_detl = 15.
3. For the county/counties specified by the user in the report parm (where TRUST_ACCOUNT.cd_cnty = user-specified county code)
4. For TRUST_ACCOUNT.cd_type = 1

Sort Criteria: (1) County (Ascending), (2) Child's Last Name (Ascending), (3) Benefit Type

Page Breaks: By County.

Output Data: This report lists all individual draw-downs and reversals of each benefit type for a child's trust account. The report includes information on the child's name, SSN, person ID, case ID, trust account ID, payment ID, Service Type, benefit type, transaction detail, draw down (or reversal or cancelled payments) amount, FFP category, date of transaction, payment begin date, and payment end date. This needs to be a flat file and allow for the output to be downloaded into Excel by the staff.

Audience: DHFS and County fiscal staff.

Business Intent: Allows a Trust Account Manager to view draw-downs reimbursed from individual trust accounts for a specified period of time. The draw-downs and reversals are further broken down by benefit type.

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    1         10        20        30        40        50        60        70        80        90        100       110       120       130
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Trust Account Drawdown Report
From: MM/DD/CCYY To MM/DD/CCYY
Report ID: FM07-06
From Date: Thru:

County: xxxxxx

Child's Last Name	First Name	SSN	Person ID	Case ID	Trust Acct ID	Payment ID	Service Type	Benefit Type	Transaction Detail	Draw Down Amount	FFP	Date of Transaction	Payment Begin Date	Payment End Date
Child 1		9999999	999999	9999999				SSA – Survivors	Drawdown	-999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY
Child 1		9999999	999999	9999999				SSA – Disability	Reversal	999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY
Child 1		9999999	999999	9999999				SSI – State	Drawdown	-999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY
Child 1		9999999	999999	9999999				SSA – Federal	Drawdown	-999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY
Child 2		9999999	999999	9999999				SSA – Survivors	Drawdown	-999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY
Child 2		9999999	999999	9999999				SSA – Disability	Reversal	999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY
Child 2		9999999	999999	9999999				SSI – State	Drawdown	-999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY
Child 2		9999999	999999	9999999				SSA – Federal	Drawdown	-999	Non-FFP	MM/DD/YY	MM/DD/YY	MM/DD/YY

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    1         10        20        30        40        50        60        70        80        90        100       110       120       130
   ----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----+----
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